

# The Intramyocardial Left Anterior Descending Artery: Prevalence, Early and Mid-Term Surgical Outcomes After Coronary Artery Bypass Procedures: A Retrospective Single-Center Study

## İntramiyokardiyal Sol Ön İnen Arter: Koroner Arter Baypas Prosedürlerinden Sonra Prevalans, Erken ve Orta Dönem Cerrahi Sonuçları: Retrospektif Tek Merkezli Çalışma

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To the editor, I read the article written by Alagha and Çiçekçioğlu published in Türkiye Klinikleri Cardiovascular Sciences 2023;35(3):81-8 entitled “The Intramyocardial Left Anterior Descending Artery: Prevalence, Early and Mid-Term Surgical Outcomes After Coronary Artery Bypass Procedures: A Retrospective Single-Center Study” with great interest.<sup>1</sup>

Olearchyk reported that intramyocardial left anterior descending artery (IMLAD) occurred in 17.7% and middle portions of the coronary artery is the most affected region.<sup>2</sup> Several surgical approaches have been established for determining LAD. Although blind direct visualization used by author in this article seems to be the easiest way, there are some disadvantages such as penetration into the right

ventricle, bleeding from surrounding tissues.<sup>3</sup> And it's usage has some limitation during beating heart.

As far as we understand from this article, patients who have IMLAD and patients who don't have IMLAD (non-IMLAD) have been compared with regard to mortality, preoperative and operative characteristics of the study groups. Although they found no statistical significance between two groups which are similar. In terms of demographic and clinical characteristics such as age, co-morbidity and used graft numbers, there are also no statistical significance between two groups with regard to cross clamp time. Moreover the cardiopulmonary bypass time found longer in non-IMLAD groups than those who have IMLAD groups. In the light of knowledge mentioned above, how do they explain this situation having conflict?

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### **Conflict of Interest**

*No conflicts of interest between the authors and / or family members of the scientific and medical committee members or mem-*

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### **Authorship Contributions**

**Idea/Concept:** Bülent Sarıtaş; **Design:** Bülent Sarıtaş; **Control/Supervision:** Bülent Sarıtaş; **Data Collection and/or Processing:** Uğur Çetingök; **Analysis and/or Interpretation:** Uğur Çetingök; **Literature Review:** Furkan Gül; **Writing the Article:** Bülent Sarıtaş, Furkan Gül; **Critical Review:** Uğur Çetingök.

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